

PTO/SB/05 (11-00)

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorne	ey Docket No.	019934-00171	ous
First In	ventor		Schall, Thomas J.
Title			OF RHESUS CYTOMEGALOVIRUS N CYTOMEGALOVIRUS ENCODED IL-

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

	E	xpress Mail Label No.	EL387639415US				
APPLICATION E		ADDRESS TO	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231				
(preferred arrangement set forth bei Descriptive title of the Invention Cross References to Related Appl Statement Regarding Fed sponsor Reference to sequence listing, a ta a computer program listing append Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (Detailed Description Claim(s) Abstract of the Disclosure	O/SB/17) for fee processing) atus. Total Pages 57] low) lications red R & D able, or dix	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper number of pages c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s)). 10. 37 C.F.R.§3.73(b)Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure					
5. Oath or Declaration a. Newly executed (original or or ob. Copy from a prior application (for a continuation/divisional of its DELETION OF INVENTO Signed statement attached deletinamed in the prior application, so 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 (due to 1.63 (d	(Total Pages] opy) (37 CFR 1.63 (d)) with Box 18 completed) OR(S) ing inventor(s) se 37 CFR CFR 1.76 appropriate box, and supply	Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. Other:					
For CONTINUATION or DIVISIONAL APPS o	Continuation-in-part iner nly: The entire disclosure of the accompany	Gn of the prior application ing continuation or div	prior application No: / oup Art Unit: from which an oath or declaration Is supplie disional application and Is hereby incorporate omitted from the submitted application parts.	ed by			
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Name							
Address							
City	State		Zip Code				
Country	Telephone		Fax				
Name (Print/Type) Rosemarie L	. Celli	Registration No. (Attorney/Agent) 42,397					
Signature Pos	emane o	1.60li	Date July 30, 2001				

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FEE TRANSMITTAL
BEST FOR FY 2004

Patent fees are subject to annual revision.

Complete if Known								
Application Number	Unassigned							
Filing Date	July 30, 2001							
First Named Inventor	Schall, Thomas J.							
Examiner Name	Unassigned							
Group Art Unit	Unassigned							
Attorney Docket No.	019934-001710US							

J	OTAL AM	OUNT	OF PA	YMENT	(\$)	776			Attorne	y Docke	t No.	01993	34-001710US	
			METH	OD OF PA	YMENT							FEE C	ALCULATION (continued)	
1.	×			issioner is t ees and cred					Large	Entity	Small	Entity		
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	Account Number	2	0-1430)				1	105	130	205	65	Surcharge - late filing fee or oath	
		_ _							127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
	Deposit Account	Tr	ownsend :	and Townse	end and	Crew LLF	•	1	139	130	139	130	Non-English specification	
	Name	L							147	2,520	147	2,520	For filing a request for reexamination	<u> </u>
	Under:	37 CFR 1	1.16 and 1						112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<u> </u>
	See 37	7 CFR 1.	.27	ntity status.					113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
2.	☐ Payı	ment En	nclosed:						115	110 .	215	55	Extension for reply within first month	<u> </u>
	☐ Check		Credit ca	ard 🗆	Money Order		Other		116	390	216	195	Extension for reply within second month	
FEE CALCULATION								- 1	117	890	217	445	Extension for reply within third month	
1.	BASIC	FILING		CALCULA	TION				118	1,390	218	695	Extension for reply within fourth month	
Lar		y Small		/					128	1,890	228	945	Extension for reply within fifth month	
Fee		Fee	Fee	Fee Des	scription	n			119	310	219	155	Notice of Appeal	
Coc		Code					Fee Paid	1 I	120	310	220	155	Filing a brief in support of an appeal	ļ
101		201	355	Utility fili	•		355	∤ [¹	121	270	221	135	Request for oral hearing	<u>├</u>
106 107		206 207	160 245	Design f Plant filir	•			1	138	1,510	138	1,510	Petition to institute a public use proceeding	
108	710	208	355	Reissue	filing fe	е			140	110	240	55	Petition to revive – unavoidable	\Box
114	150	214	75	Provisio ¹	nal filing	fee		J 1	141	1,240	241	620	Petition to revive – unintentional	ļ
				- 34 441			(A) 0.00	7 I	142	1,240	242	620	Utility issue fee (or reissue)	
			SUBTOT	/AL (1)			_(\$)355	- 1	143	440	243	220	Design issue fee	<u> </u>
2.	EXTRA CL	AIM FE	ES					1	144	600	244	300	Plant issue fee	
		. ••••		Extra		e from	Fee	[1	122	130	122	130	Petitions to the Commissioner	
Total	Claims	49 -	-20** =	Claims 29		low \$9	Paid = \$261] ¹	123	50	123	50	Petitions related to provisional applications	
Indep Claim	endent is	7 .	-3** =	4] x [\$	\$40	= \$160] 1	126	180	126	180	Submission of Information Disclosure Stmt	
Multip Depe	ole ndent			<u></u>	_ × [=	j	581	40	581	40	Recording each patent assignment per property (times number of properties)	
Lar. Fee	-	tity Sma		ntity 80 Eac f	*arin	41			146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
Coc		Coc	de (\$)	i) ree L	Descript			1	149	710	249	355	For each additional invention to be	
103						cess of 20		Ī					examined (37 CFR § 1.129(b))	
102			_				excess of 3	- [179	710	279	355	Request for Continued Examination (RCE)	
104			•	•• Re	issue ind	dependen	im, if not paid t claims over	1	169	900	169	900	Request for expedited examination of a design application	
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110	18	210	9		original į		cess of 20 and	' [`	Other le	s (specii)	<i>y i</i>			
				SUBTOTA	AL (2)	(\$)421			The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.					
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	or number pre	aviousty n	aid if ores	ter: For Rei	SSURS, SF	e above								

SUBMITTED BY Complete (if applicable)											
Name (Print/Type)	Rosemarie L. Celli	Registration No. (Attorney/Agent)	42,397	Telephone	650-326-2400						
Signature	Ros	emarie Q.C	ell'	Date	July 30, 2001						

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